



09-08-68

IAP04Rec'd PCT 05 SEP 2008

PTO/SB/21 (08-08)

Approved for use through 08/31/2008. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/586,124-Conf. #1358
	Filing Date	July 14, 2006
	First Named Inventor	Kevin J. Lumb
	Art Unit	N/A
	Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission	Attorney Docket Number	81221(303981)

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form x2 <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): Part 2 Copy of Notice Declaration Return Receipt Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	EDWARDS ANGELL PALMER & DODGE LLP		
Signature			
Printed name	Ralph A. Loren		
Date	September 5, 2008	Reg. No.	29,325



Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2008		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/586,124-Conf. #1358
TOTAL AMOUNT OF PAYMENT		Filing Date	July 14, 2006
(\$)		First Named Inventor	Kevin J. Lumb
1,870.00		Examiner Name	Not Yet Assigned
		Art Unit	N/A
		Attorney Docket No.	81221(303981)

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify):	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 04-1105
Deposit Account Name: Edwards Angell Palmer & Dodge LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	
2. EXCESS CLAIM FEES							
						Small Entity	
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						210	105
Multiple dependent claims						370	185
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
- 20 =		x	50.00	=	1,250.00		
HP = highest number of total claims paid for, if greater than 20.						Fee (\$)	Fee Paid (\$)
						370.00	370.00
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
- 3 =		x		=			
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets		Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)	
- 100 =		/50 =	(round up to a whole number) x				
4. OTHER FEE(S)							
						Fees Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1051 Surcharge-Late oath or declaration						130.00	
1251 Extension for response within first month						120.00	

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	29,325
Name (Print/Type)	Ralph A. Loren	Telephone	(617) 239-0233
		Date	September 5, 2008

09/10/2008 GFREY1 00000010 041105 10586124
01 FC:1615 1250.00 DA
02 FC:1617 130.00 DA
03 FC:1616 370.00 DA



Application No. (if known): 10/586,124

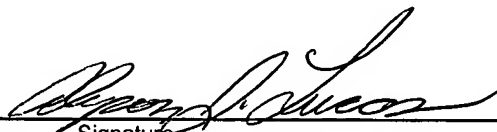
Attorney Docket No.: 81221(303981)

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EM053181640US in an envelope addressed to:

MS Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on September 5, 2008
Date


Signature

Alyson J. Lucas

Typed or printed name of person signing Certificate

Registration Number, if applicable

(617) 951-0735
Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Transmittal (1 page)
Fee Transmittal (1 page) x2
Declaration
Part 2 Copy of Notice
One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
Response to Notice to File Missing Parts of Application (2 pages)
Charge \$1,870.00 to deposit account 04-1105
Postcard



Docket No.: 81221(303981)
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Kevin J. Lumb et al.

Application No.: 10/586,124

Filed: July 14, 2006

For: PITUITARY ADENYLATE CYCLASE
ACTIVATING PEPTIDE (PACAP)
RECEPTOR (VPAC2) AGONISTS AND
THEIR PHARMACOLOGICAL METHODS
OF USE

Confirmation No.: 1358

Art Unit: N/A

Examiner: Not Yet Assigned

RESPONSE TO NOTICE TO FILE MISSING PARTS OF APPLICATION

MS Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Notice to File Missing Parts of Application – Filing Date
Granted mailed June 11, 2008, Applicant respectfully submits a Declaration, a Petition
for Extension of Time, and Part 2 Copy of Notice.

Please charge our Deposit Account No. 04-1105 in the amount of \$1,870.00
covering the fees set forth in 37 CFR 1.17(a)(1) and 1.16(f). The Director is hereby
authorized to charge any deficiency in the fees filed, asserted to be filed or which
should have been filed herewith (or with any paper hereafter filed in this application by

this firm) to our Deposit Account No. 04-1105, under Order No. 81221(303981). A duplicate copy of this paper is enclosed.

Dated: September 5, 2008

Respectfully submitted,

By 

Ralph A. Loren

Registration No.: 29,325

EDWARDS ANGELL PALMER & DODGE
LLP

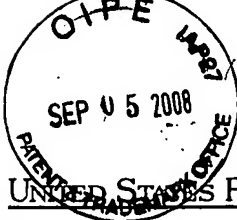
Customer No. 21874

P. O. Box 55874

Boston, MA 02205

(617) 239-0233

Attorneys/Agents For Applicant



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov

U.S. APPLICATION NUMBER NO.	FIRST NAMED APPLICANT	ATTY. DOCKET NO.
10/586,124	Kevin Clairmont	5189

35969
Bayer Health Care LLC
400 Morgan Lane
West Haven, CT 06516

INTERNATIONAL APPLICATION NO.	
PCT/US05/02609	
I.A. FILING DATE	PRIORITY DATE
01/27/2005	01/27/2004

CONFIRMATION NO. 1358
371 FORMALITIES LETTER



Date Mailed: 06/11/2008

NOTIFICATION OF MISSING REQUIREMENTS UNDER 35 U.S.C. 371 IN THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US)

The following items have been submitted by the applicant or the IB to the United States Patent and Trademark Office as a Designated Office (37 CFR 1.494):

- Priority Document
- Copy of the International Application filed on 07/14/2006
- Copy of the International Search Report filed on 07/14/2006
- Information Disclosure Statements filed on 07/14/2006
- Biochemical Sequence Diskette filed on 07/14/2006
- Request for Immediate Examination filed on 07/14/2006
- U.S. Basic National Fees filed on 07/14/2006
- Priority Documents filed on 07/14/2006

537197885
(achieve #?)

The applicant needs to satisfy supplemental fees problems indicated below.

The following items **MUST** be furnished within the period set forth below in order to complete the requirements for acceptance under 35 U.S.C. 371:

- Additional claim fees of \$1620 as a non-small entity, including any required multiple dependent claim fee, are required. Applicant must submit the additional claim fees or cancel the additional claims for which fees are due.
- Oath or declaration of the inventors, in compliance with 37 CFR 1.497(a) and (b), identifying the application by the International application number and international filing date.
- To avoid abandonment, a surcharge (for late submission of filing fee, search fee, examination fee or oath or declaration) as set forth in 37 CFR 1.492(h) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.

SUMMARY OF FEES DUE:

Total additional fees required for this application is \$1500 for a Large Entity:

- \$130 Surcharge.

Total additional claim fee(s) for this application is \$1620

- \$1250 for 58 total claims over 20.
- \$370 for multiple dependent claim surcharge.

(A previous payment of \$250 will be applied to the additional fees indicated above.)

DOCKETED	
RESPONSE DATE	8/11/08
ACTION REQUIRED	MR
FILED	12/11/08

ALL OF THE ITEMS SET FORTH ABOVE MUST BE SUBMITTED WITHIN TWO (2) MONTHS FROM THE DATE OF THIS NOTICE OR BY 32 MONTHS FROM THE PRIORITY DATE FOR THE APPLICATION, WHICHEVER IS LATER. FAILURE TO PROPERLY RESPOND WILL RESULT IN ABANDONMENT.

The time period set above may be extended by filing a petition and fee for extension of time under the provisions of 37 CFR 1.136(a).

Applicant is reminded that any communications to the United States Patent and Trademark Office must be mailed to the address given in the heading and include the U.S. application no. shown above (37 CFR 1.5)

Registered users of EFS-Web may alternatively submit their reply to this notice via EFS-Web.

<https://portal.uspto.gov/authenticate/AuthenticateUserLocalEPF.html>

For more information about EFS-Web please call the USPTO Electronic Business Center at 1-866-217-9197 or visit our website at <http://www.uspto.gov/ebc>.

If you are not using EFS-Web to submit your reply, you must include a copy of this notice.

LAMONT M HUNTER

Telephone: (703) 308-9140 EXT 201